

May 12, 2016

To: County Auditor

From: Emily Paulsen  
WIC Program

Re: Fiscal Year 2017 WIC County Contract

Please find enclosed two (2) copies of the FY2017 contract for your review and approval. The contract period is June 1, 2016 through May 31, 2017.

Listed below are important instructions to follow:

- Review all provisions of the contract. Please note section *II. SUBRECIPIENT ATTESTATION*, is new to the contracts this fiscal year.
- Sign and date both copies of the contract where it states "Provider Signature and Date"
- Complete the Provider Contact Person and Phone number for both copies
- Complete the section of both copies entitled "The following shall be completed by the Provider"
- Complete the enclosed W-9 form.
- Submit proof of insurance (a copy/certificate) of what is specified in the contract – Commercial General Liability, Worker's Compensation or Business Automobile Liability Insurance
- Please return in the enclosed envelope both copies of the contract, the enclosed W-9 form and insurance certificates to the following address **as soon as possible**:

Emily Paulsen  
South Dakota Department of Health, WIC Program  
600 East Capitol Ave.  
Pierre SD 57501

Upon receipt of the contract and once required Department of Health signatures are obtained, a signed copy will be returned to you for your file. **Payment for contract services cannot begin until the department has received the signed contract, W-9 form and required certificates of insurance forms.**

The monthly Expenditure Report, Attachment B, will be emailed to the County Auditor upon receipt of the signed contracts.

During the contract year, should you have questions regarding the contract, please contact me at (605) 773-4988 or by email at [emily.paulsen@state.sd.us](mailto:emily.paulsen@state.sd.us).

Thank you for your continued support in providing WIC services to South Dakota residents.